

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	met		02/18/01
O.I.P.E. CLASSIFIER			3/19/01
FORMALITY REVIEW	OK	48	04/03/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/24/01
2	✓	✓	7/24/01
3	✓	✓	7/24/01
4	✓	✓	7/24/01
5	✓	✓	7/24/01
6	✓	✓	7/24/01
7	✓	✓	7/24/01
8	✓	✓	7/24/01
9	✓	✓	7/24/01
10	✓	✓	7/24/01
11	✓	✓	7/24/01
12	✓	✓	7/24/01
13	0	✓	✓
14	0	✓	✓
15	0	✓	✓
16	0	✓	✓
17	✓	✓	✓
18	✓	✓	✓
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If more than 150 claims or 10 actions  
staple additional sheet here

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